POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*Mr*	6764	9/20/00
O.I.P.E. CLASSIFIER	*JW*		9-26-00
FORMALITY REVIEW	*X*	71531	10-31-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
– (Through numeral)...	Canceled	A	.... Appeal
–A	.... Restricted	O	.... Objected

Claim			Date												Claim		Date												Claim		Date											
Final	Original	9/2/03	10/11/00	3/22/01											Final	Original														Final	Original												
1	✔	✔	✔												51															101													
2	✔	✔	✔												52															102													
3	✔	✔	✔												53															103													
4	✔	✔	✔												54															104													
5	✔	✔	Ø												55															105													
6	✔	✔	Ø												56															106													
7	✔	✔	✔												57															107													
8	✔	✔	✔												58															108													
9	✔	✔	✔												59															109													
10	O	O	=												60															110													
11	O	O	=												61															111													
12	O	O	=												62															112													
13	O	O	=												63															113													
14	✔	=	=												64															114													
15	✔	=	=												65															115													
16	✔	=	=												66															116													
17	✔	=	=												67															117													
18	✔	=	=												68															118													
19	✔	=	=												69															119													
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50															100															150													

If more than 150 claims or 10 actions
staple additional sheet here

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